

SERIAL NUMBER <div style="text-align: center;">09/211,730</div>	FILING DATE <div style="text-align: center;">12/15/98</div>	CLASS <div style="text-align: center;">348</div>	GROUP ART UNIT <div style="text-align: center;">2711</div>	ATTORNEY DOCKET NO. <div style="text-align: center;">450,24087</div>
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APPLICANT

KEITH C. THOMAS, VERMILLION, SD.

  
  

**\*\*CONTINUING DOMESTIC DATA\*\*\*\*\***

VERIFIED

RP *None*

  

**\*\*371 (NAT'L STAGE) DATA\*\*\*\*\***

VERIFIED

RP *None*

  
  
  

**\*\*FOREIGN APPLICATIONS\*\*\*\*\***

VERIFIED

RP *None*

  
  
  

FOREIGN FILING LICENSE GRANTED 01/12/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY <div style="text-align: center;">SD</div>	SHEETS DRAWING <div style="text-align: center;">3</div>	TOTAL CLAIMS <div style="text-align: center;">29</div>	INDEPENDENT CLAIMS <div style="text-align: center;">5</div>
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Verified and Acknowledged RP *None*

SEE CUSTOMER NUMBER: 021186

  
  

APPARATUS AND METHOD FOR USER-BASED CONTROL OF TELEVISION CONTENT

  
  

FILING FEE RECEIVED <div style="text-align: center;">\$1,078</div>	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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ADDRESS

TITLE